

BLOOMINGTON INVESTMENT INCENTIVE FUND NON-PROFIT MATCHING GRANT FUND APPLICATION CHECKLIST

1. Section1.

		ational Overview Contact information and 501(Staff information Governance Structure Product/service description Audience/market/constituency Marketing strategy Organizational financial documents	y served	
	Project	Overview Project summary dentified need/opportunity Farget audience/market/cons Marketing for project Collaborators Energy/conservation efforts Project viability Budget narrative mpact	tituency	
2.	Section Control Con	2. Completed Loan Application General Information Proposal Finances & Reading Signed Certification Signed Credit Report Authoriz	ess	
3.	Attachn	ent A. Project Readiness Doo Matching funds secured Land or building purchase do Construction contract(s) Equipment/Inventory order in	cumentation	
4.	Applica		ole to the City of Bloomington	
5.	Please submit above documents to:			
	City of Bloomington Economic & Sustainable Development Department P.O. Box 100 Bloomington, IN 47402			
	Contact Phone: Fax: Email:	Miah Michaelson, Ass 812-349-3418 812-349-3520 michaelm@bloomingt	sistant Director for the Arts	



BLOOMINGTON INVESTMENT INCENTIVE FUND NON-PROFIT MATCHING GRANT FUND SECTION 1

Organizational Overview

- 1. Description
 - a. Contact information Legal name and full contact information for organization including FEIN. Attach copy of IRS 501(c) 3 determination letter.
 - b. Staff Contact information and brief bios on relevant organizational staff: contact information and bios of all project management staff.
 - c. Governance Structure 1-2 page narrative on organizational structure and function including list of all board members with affiliations. Include information on the frequency of meetings and summary of basic board functions (including financial functions).
 - d. Product, Service, or Outcome 1-2 page description of product or service produced or outcomes sought.
 - e. Audience/Market/Constituency Served 1-2 page narrative on audience for whom product/service/outcome is produced. Assess and differentiate organization from other similar providers in the marketplace. Include findings of previous or current market/audience/constituency analysis.
 - Marketing Provide overview of organizational marketing strategy.
- 2. Financial Current fiscal year budget and three (3) years previous of either audit or balance sheet and profit/loss statement.
- 3. Strategic Plan and mission statement 1-2 page overview of organization's current strategic plan, mission, and outline other organizational planning efforts that may be in progress.

Project Overview

- 1. Description and Rationale
 - a. Project Narrative A description of project to include the following:
 - i. Project Summary 1-2 page narrative including development history. key staff, project specifics, role of project in strategic plan and timeline for implementation.
 - ii. Identified Need/Opportunity What is the identified need, how does the project meet that need and how does the project align with current organizational and/or community planning.
 - iii. Target Audience/Market/Constituency Identify and quantify the project audience including any increases in quantity or efficiency.
 - iv. Marketing Outline marketing efforts for project, including timeline.
 - v. Collaborators Describe any key collaborators on project.
 - vi. Energy/Conservation Efforts Describe any energy or conservation efforts that reflected in your project as well as your organization.
 - b. Viability of project Describe plans to ensure project's ongoing viability beyond the timeline of the current grant.
- 2. Financial
 - a. Budget narrative Provide a narrative explanation for all items on project budget in Part 2 of the application. Indicate where costs are estimated and by what methodology. Indicate sources for all anticipated revenue
 - b. Impact Describe the project's impact on the organization's financial health and growth.



BLOOMINGTON INVESTMENT INCENTIVE FUND NON-PROFIT MATCHING GRANT FUND SECTION 2: Application - Part 1 GENERAL INFORMATION

Rev. 2010

Please attach additional sheets if necessary. Date of application:

Applicant name(s):				
Applicant phone:				
Applicant address:				
Applicant email:				
not-for-profit contact ir	not-for-profit enterprise are not one and the same, please provide information.			
Not-for-profit name:				
Phone:				
Address:				
Email:				
Total amount requested: Total project cost: Grant Eligibility: Please check one. Organization with a retail or commercial activity as a primary purpose. Organization that operates a social enterprise, in which at least one social or environmental goal is considered to be of equal importance to traditional commercial or other business goals.				
Start-up date:				
Type of incorporation:				
Incorporation date: State:				
Federal Tax ID #:	NAICS code:			

List the hours of operation for the organization.

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

List the days and hours each principal owner will be at the business.

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

1. Please list any insurance policies related to the organization currently in place (i.e. health plans, liability coverage, etc.)



BLOOMINGTON INVESTMENT INCENTIVE FUND NON-PROFIT MATCHING GRANT FUND SECTION 2: Application – Part 2 PROPOSAL FINANCES & READINESS

Project Budget:

Description	BIIF Request	Other Source	Other Source	Total Line Item Cost
	\$	\$ Define source:	\$ Define source:	\$
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	\$	\$ Define source:	\$ Define source:	\$
	\$	\$ Define source:	\$ Define source:	\$
	\$	\$ Define source:	\$ Define source:	\$
TOTAL GRANT REQUEST Must not exceed 50% of total project cost. Total Request must not exceed \$25,000.	\$			TOTAL PROJECT COST: \$

Project Readiness Please answer questions below if applicable to your business and provide documentation as necessary in Attachment A.					
	For those sources of matching funds that are not already secured, please explain where your organization is at in the process.				
Has the land	or building fo	r this project beer	n purchased or has an offer been made?		
Yes	No 🗌	If so, when:			
Provide furth	ner explanatior	if necessary.			
Have constru	uction contract	ts for this project	peen signed?		
Yes 🗌	No 🗌	If so, when:			
Provide furth	ner explanatior	if necessary.			
Has equipme	ent or inventor	y to be financed b	peen ordered?		
Yes 🗌	Yes No If so, when:				
Provide further explanation if necessary.					
Professional Support Personnel					
(i.e. attorney, accountant, bank representative, etc.)					
Name:	Address:	Phone:	Occupation:		
Name:	Address:	Phone:	Occupation:		
Name:	Address:	Phone:	Occupation:		
Name:	Address:	Phone:	Occupation:		
Name:	Address:	Phone:	Occupation:		



BLOOMINGTON INVESTMENT INCENTIVE FUND NON-PROFIT MATCHING GRANT FUND CERTIFICATION

The loan applicant herein certified that:

- To the best of the applicant's knowledge and belief, the data presented in this loan application is true and correct, and is provided for the purpose of obtaining or maintaining credit.
- The purpose described in this application has been duly and legally authorized by the applicant.
- Upon approval of the funds requested, the applicant is willing and is duly and legally authorized to enter into a legally binding loan commitment and will comply with all of the provisions and conditions of any loan agreement.
- The applicant hereby authorizes the Loan Review Committee, its authorized agent and representatives, to investigate the applicant's credit worthiness, credit capacity, or business affairs.
- The applicant hereby authorizes any person, business, and/or financial institution having information pertaining to the applicant's credit worthiness credit capacity, or business affairs to release the same to the Loan Review Committee, its authorized agents or representatives.
- The applicant agrees to hold harmless the City of Bloomington, its officers, agents, and the City of Bloomington Loan Review Committee members and their respective organizations form liability as a result of actions and outcomes taken during or after the loan review process.
- I further certify that the individual(s) applying for the Business Investment Incentive Loan Fund are not in arrears on any payments, fees, charges, fines or penalties owed to the City of Bloomington, Indiana, including, but not limited to, City of Bloomington Utilities. Bloomington Transit, and any other City of Bloomington departments, boards or commissions.

Applicant	Co-applicant
Organization name:	Organization name:
By (Applicant's signature)	By (Co-applicant's signature)
Printed name:	Printed name:
Title:	Title:
Date:	Date:

Please return this completed application along with \$100.00 processing fee and appropriate attachments to:

City of Bloomington Department of Economic & Sustainable Development PO Box 100 Bloomington, IN 47402

CREDIT REPORT AUTHORIZATION AND RELEASE

Authorization is hereby granted to the City of Bloomington to obtain a standard factual data credit report through a credit reporting agency chosen by the City of Bloomington.

My signature below authorizes the release to the credit-reporting agency a copy of my credit application and authorizes the credit-reporting agency to obtain information regarding my employment, savings accounts, and outstanding credit accounts (mortgage, auto loans, personal loans, charge cards, credit unions, etc.) Authorization is further granted to the reporting agency to use a photo static reproduction of this authorization if necessary to obtain any information regarding the above-mentioned information.

Any reproduction of this credit report authorized and release made by reliable means (for example, photocopy or facsimile) is considered an original.

1.		
	Borrower's signature	
	Date:	Social Security Number:
2		
	Borrower's signature	
	Date:	Social Security Number: